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EDITORIAL

CMA's Position on Medi-Cal's Straits

IN TAKING the position it has adopted with regard to the proposed restriction of services under the Medi-Cal program, the California Medical Association was guided by a wish to make the program work as well as possible during a trying—and, it is hoped, temporary—budgetary shortage. Fully as important is the consideration that from this position CMA can best use its influence to steer Medi-Cal back to being the mainstream medical care plan for medically needy Californians that it was intended to be when legislation creating it was enacted.

The association endorsed that legislation in the belief that it offered a means of providing medical care through the regular channels of medical practice to persons who otherwise could not be served in that manner. It still endorses the legislation and the purpose.

When the state administration in Sacramento changed at the beginning of this year, CMA offered its counsel and cooperation to Mr. Spencer Williams, the new administrator of California's Health and Welfare Agency, particularly with regard to Medi-Cal, which was just beginning to operate and was feeling some of the pains of newness. Soon after mid-year, Mr. Williams reported that the revenues available were inadequate to provide all the services encompassed in the Medi-Cal program, and as a solution he proposed emer-

gency regulations limiting the kinds and the extent of health services to fit the available funds. He discussed the proposal with CMA officers and the Council. The Council accepted his fiscal appraisal and pledged the association's cooperation to help deliver the highest possible quality of medical care under regulatory limitations which the Council looked upon as "an interim measure under the current fiscal restrictions imposed by state and federal law."

We well recognize that this position is not dynamic or dramatic. But it need not be, for we believe that the Medi-Cal plan is medically and sociologically sound and that, whatever the reason for the present fiscal difficulty, the courts, the administration and the legislature will, among them, supply the action necessary to bring about a solution that will give the program the support it warrants.

A successful challenge in the courts of the legality of the regulations will not remove or remedy the fiscal problems confronting the program. Other approaches to the matter will undoubtedly be proposed and studied in the coming weeks.

Meanwhile the California Medical Association stands ready to consult with representatives of all branches of government and to use the channels of communication with its members where its help can be useful in promoting good medical care for the people of this state.